AMENDED IN ASSEMBLY MARCH 16, 2016

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 1739

Introduced by Assembly Member Waldron

February 1, 2016

An act to amend Section 2827.3 of the Public Utilities Code, relating to electricity. An act to add Section 14133.75 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL'S DIGEST

AB 1739, as amended, Waldron. Net energy metering. Medi-Cal: allergy testing.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Existing law provides for a schedule of benefits under the Medi-Cal program, and authorizes the use of utilization controls, including prior authorization, that may be applied to those covered benefits and that are reviewed for, among other things, medical necessity. Under the Medi-Cal program, a service is "medically necessary" or a "medical necessity" when it is reasonable and necessary to protect life, to prevent significant illness or significant disability, or to alleviate severe pain.

This bill would require the department to treat serologic-specific IgE allergy tests and percutaneous skin allergy tests as equivalent in their sensitivity and accuracy for confirming the existence of an allergy in a patient, and to treat those tests as medically necessary for those individuals with a medical history consistent with specified conditions.

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The bill would require the department to update its provider bulletins, as necessary, to reference the most current professional literature and guidance related to allergy testing.

Existing law requires all electric utilities to develop a standard contract or tariff providing for net energy metering, and to make this contract available to eligible customer generators, upon request, except as provided. Existing law requires the Public Utilities Commission to complete a study by October 1, 2013, to determine who benefits from, and who bears the economic burden, if any, of the net energy metering program, and to determine the extent to which each class of ratepayers and each region of the state receiving service under the net energy metering program is paying the full cost of the services provided to them by electrical corporations, and the extent to which those customers pay their share of the costs of public purpose programs. Existing law requires the commission to report the results of the study to the Legislature within 30 days of its completion.

This bill would make a nonsubstantive change to this provision.

Vote: majority. Appropriation: no. Fiscal committee: no-yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. The Legislature finds and declares all of the 2 following:
- (a) Historically, allergies were diagnosed by an allergist who used a percutaneous, or "skin-prick," test to infect the skin of a patient with varying allergens for the purpose of determining the patient's reaction to those allergens. This procedure required the patient to be referred by his or her primary care physician to an allergist, and required the patient to undergo a series of pricks to his or her skin.
 - (b) Advances in blood testing technology using serologic-specific IgE quantitative testing allow a patient to be diagnosed without a referral to a specialist.
- 13 (c) Professional literature and guidance from the National 14 Heart, Lung, and Blood Institute at the National Institutes of Health 15 has determined that blood tests and skin tests for allergies are 16 equal in their diagnostic value, and that blood testing is preferred 17 in the case of testing for food allergies.

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(d) Private health care insurance plans recognize the professional literature and guidelines regarding the efficacy of blood testing and cover blood testing for the diagnosis of allergies.

- (e) Medi-Cal does not cover blood testing for allergies in the same manner as private health care insurance.
- (f) Fee-for-service Medi-Cal patients are not receiving the same level of care as patients with private health insurance coverage. Due to an insufficient number of allergists available to diagnose and treat Medi-Cal patients, the diagnosis of many patients covered by Medi-Cal is delayed or never occurs.
- (g) Medi-Cal coverage decisions must be based on the latest and most current medical literature and studies.
- SEC. 2. Section 14133.75 is added to the Welfare and Institutions Code, to read:
- 14133.75. (a) The department shall treat serologic-specific IgE tests and percutaneous skin tests as equivalent confirmatory tests in terms of their sensitivity and accuracy, and shall treat them as medically necessary for those individuals with a medical history consistent with any of the following:
- (1) An inhalant allergy.
- 21 (2) A food allergy.

- (3) Hymenoptera venom allergy or an allergy to stinging insects.
- (4) Allergic bronchopulmonary aspergillosis (ABPA).
- (5) Certain parasitic diseases.
- 25 (6) Allergies to specific drugs.
 - (b) The department shall update its provider bulletins, as necessary, to reference the most current professional literature and guidance related to allergy testing.
 - SECTION 1. Section 2827.3 of the Public Utilities Code is amended to read:
 - 2827.3. (a) By October 1, 2013, the commission shall complete a study to determine who benefits from, and who bears the economic burden, if any, of, the net energy metering program authorized pursuant to Section 2827, and to determine the extent to which each class of ratepayers and each region of the state receiving service under the net energy metering program is paying the full cost of the services provided to them by electrical corporations, and the extent to which those customers pay their share of the costs of public purpose programs. In evaluating program costs and benefits for purposes of the study, the

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1 commission shall consider all electricity generated by renewable 2 electric generating systems, including the electricity used onsite 3 to reduce a customer's consumption of electricity that otherwise 4 would be supplied through the electrical grid, as well as the 5 electrical output that is being fed back to the electrical grid for which the customer receives credit or net surplus electricity 6 7 compensation under net energy metering. The study shall quantify 8 the costs and benefits of net energy metering to participants and 9 nonparticipants and shall further disaggregate the results by utility, 10 customer class, and household income groups within the residential class. The study shall further gather and present data on the income 11 12 distribution of residential net energy metering participants. In order 13 to assess the costs and benefits at various levels of net energy 14 metering implementation, the study shall be conducted using 15 multiple net energy metering penetration scenarios, including, at a minimum, the capacity needed to reach the solar photovoltaic 16 17 goals of the California Solar Initiative pursuant to Section 25780 18 of the Public Resources Code, and the estimated net energy 19 metering capacity under the 5-percent minimum requirement of 20 paragraphs (1) and (4) of subdivision (c) of Section 2827.

- (b) (1) The commission shall report the results of the study to the Legislature within 30 days of the study's completion.
- (2) The report shall be submitted in compliance with Section 9795 of the Government Code.
- (3) Pursuant to Section 10231.5 of the Government Code, this section is repealed on July 1, 2017.